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3 February 1956

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MEMORANDUM FOR: Chief, Medical Staff

ATTENTION :

SUBJECT :

Criteria for Medical Evaluation of Personnel to be  
Assigned to Project AQUATONE

1. For some months past, members of the Project Staff and I have discussed with you the formulation of certain medical selection criteria particular to our activities. In large part, these criteria revolved around the physical locale in which we assumed we would be operating overseas. As we have neared our initial deployment date, the areas of our probable overseas operation have narrowed until we feel that we now have a slightly different bill of geographical particulars than the one on which medical criteria are presently based. Therefore, I should like to briefly state our newest assumptions, and suggest that you might find it helpful to then review the selection criteria in the light of apparent changes from our earlier estimates.

2. At this time, it is anticipated that the least desirable of three possible areas would present a situation similar to the following:

a. Detachment A would be established as a tenant on an existing military base in the Eastern Mediterranean Area. Its location is approximately 130 air miles from a major city. Although most of the personnel would be stationed at the military base, plans call for an airlift shuttle service for off-duty personnel to the major city. It is also expected that transportation will be available from the major city for visits to Europe or other Mediterranean areas for leave purposes. Political considerations require that any small city near the military base be off-limits to all Project personnel.

b. It is expected that the Project would not be the sole occupant of the military base, but at the same time, the area occupied by the Detachment would be remoted and secured. Thus, movement of personnel on the operational location would be restricted in a manner not unlike that presently in existence . However, complete recreation facilities and a sizeable American colony exist in the major city previously referred to.

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c. Facilities on the base would include an American-run mess, American-run medical facilities, adequate, though not luxurious, billeting, and whatever recreation and support facilities can be

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locally provided by the Base Commander. It is also expected that forward echelons would move out of this military base for TDY operations of from several days to four weeks duration. Living conditions during these staging operations would necessarily be less desirable than those to be found at the rear base, and it is entirely likely field rations would be consumed and that billeting would be in tents or other more or less portable housing structures. Movement of personnel engaged in forward staging operations would be restricted to the base from which they were operating, for considerations of security. At the moment it is not clear to which countries forward echelons would conceivably move, though Central Europe and the Middle East are distinct possibilities.

3. We appreciate the difficulties under which your staff has operated in conducting the medical and psychiatric evaluations you have already completed. We shall continue to anticipate receiving your best guidance on medical evaluations and will keep you informed of changes which we believe may affect the criteria for such evaluations. I do not believe that any changes will occur which will make more drastic the specifications than those which were submitted to you last summer; if anything, the operating conditions and environmental factors may improve slightly.

4. In this context, it might be well to mention the case of a  currently under consideration by the Project, and, I believe, already examined by your staff. I would appreciate your review of his case in the light of the information which I have set forth above.

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/s/

RICHARD M. BISSELL, JR.  
Project Director

JAC:mah

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4 - Admin  
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